

# FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation <b>CatholicVote.org</b>			3. FEC Identification Number <b>C</b> C90011800
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported PO Box 2709			
(c) City, State and ZIP Code Chicago IL 60690			
2. Occupation and Name of Employer (for Individual Filers Only)			

4. TYPE OF REPORT (check appropriate boxes):

- (a)  April 15 Quarterly Report
- July 15 Quarterly Report  24-Hour Report
- October 15 Quarterly Report  48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment?  No  Yes, it amends the report filed on  /  /

5. COVERING PERIOD: FROM  /  /  THROUGH  /  /

6. TOTAL CONTRIBUTIONS.....  0.00

7. TOTAL INDEPENDENT EXPENDITURES .....  10198.69

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

<b>TYPE OR PRINT NAME OF PERSON COMPLETING FORM</b>	<b>SIGNATURE</b>	<b>DATE</b>
Joshua Mercer	<i>Joshua Mercer</i>	11/05/2014

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
CatholicVote.org

Full Name (Last, First, Middle Initial) of Payee Facebook		Date of Public Distribution/Dissemination 11 / 04 / 2014	
Mailing Address 1601 Willow Road		Amount 244.54	
City Menlo Park	State CA	Zip Code 94025	
Purpose of Expenditure advertisement		Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: PAT ROBERTS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		1244.54	

Transaction ID : F57.4287

Full Name (Last, First, Middle Initial) of Payee Facebook		Date of Public Distribution/Dissemination 11 / 04 / 2014	
Mailing Address 1601 Willow Road		Amount 142.58	
City Menlo Park	State CA	Zip Code 94025	
Purpose of Expenditure Advertisement		Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: THOM R TILLIS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		11115.35	

Transaction ID : F57.4288

Full Name (Last, First, Middle Initial) of Payee Facebook		Date of Public Distribution/Dissemination 11 / 04 / 2014	
Mailing Address 1601 Willow Road		Amount 218.50	
City Menlo Park	State CA	Zip Code 94025	
Purpose of Expenditure advertisement		Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: DAN SULLIVAN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		718.50	

Transaction ID : F57.4289

(a) SUBTOTAL of Itemized Independent Expenditures.....	605.62
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
CatholicVote.org

Full Name (Last, First, Middle Initial) of Payee Facebook		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 04 / 2014	
Mailing Address 1601 Willow Road		Amount 9343.07	
City Menlo Park	State CA	Zip Code 94025	
Purpose of Expenditure Advertisement		Category/Type 004	Office Sought: <input type="checkbox"/> House State: CO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MARK E UDALL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19852.80		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee VerveMail LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 04 / 2014	
Mailing Address 5348 Vegas Drive Suite 289		Amount 250.00	
City Las Vegas	State NV	Zip Code 89108	
Purpose of Expenditure endorsement email		Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 05 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: VINCENT A KOLBER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 250.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	9593.07
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	10198.69